Please type a plus sign (+) inside this box →

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Smp

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/046,070
Filing Date	January 11, 2002
First Named Inventor	Karpoff, Wayne
Group Art Unit	2652
Examiner Name	Unassigned

Total Number of Pages in This Submission	14	Attorney Docket Number	019417-003710US
--	----	------------------------	-----------------

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input checked="" type="checkbox"/> Assignment Papers (+ Coversheet) (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input checked="" type="checkbox"/> Power of Attorney or Authorization of Agent	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Return Postcard; Declaration; Certificate Under CFR 3.73(b) (+ copy of Assignment); copy of Notice to be returned.
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s)	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
	Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm and Individual name	Townsend and Townsend and Crew LLP Gerald T. Gray	Reg. No. 41,797
Signature		
Date	March 28, 2002	

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:

March 28, 2002

Typed or printed name	Gina M. Zoggas
Signature	
Date	March 28, 2002

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

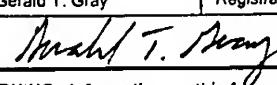
WC 9039369 v1

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

 OPI FEE TRANSMITTAL for FY 2001 <small>Patent fees are subject to annual revision.</small>		Complete if Known	
		Application Number	10/046,070
		Filing Date	January 11, 2002
		First Named Inventor	Karpoff, Wayne
		Examiner Name	Unassigned
		Group Art Unit	2652
TOTAL AMOUNT OF PAYMENT (\$ 475		Attorney Docket No. 019417-003710US	

METHOD OF PAYMENT				FEES CALCULATION (continued)			
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:				3. ADDITIONAL FEES			
Deposit Account Number	20-1430			Large Fee Code	Entity Fee (\$)	Small Entity Fee Code (\$)	Entity Fee (\$)
Deposit Account Name	Townsend and Townsend and Crew LLP			105	130	205	65
<input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27				127	50	227	25
2. <input type="checkbox"/> Payment Enclosed:				139	130	139	130
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other				147	2,520	147	2,520
				112	920*	112	920*
				113	1,840*	113	1,840*
				115	110	215	55
				116	400	216	200
				117	920	217	460
				118	1,440	218	720
				128	1,960	228	980
				119	320	219	160
				120	320	220	160
				121	280	221	140
				138	1,510	138	1,510
				140	110	240	55
				141	1,280	241	640
				142	1,280	242	640
				143	460	243	230
				144	620	244	310
				122	130	122	130
				123	50	123	50
				126	180	126	180
				581	40	581	40
				146	740	246	370
				149	740	249	370
				179	740	279	370
				169	900	169	900
				Other fee (specify)			
				The Commissioner is authorized to charge any additional fees to the above noted Deposit Account.			
				*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$105)			

**or number previously paid, if greater; For Reissues, see above

SUBMITTED BY						Complete (if applicable)	
Name (Print/Type)	Gerald T. Gray	Registration No. (Attorney/Agent)	41,797	Telephone	925-472-5000		
Signature					Date	March 18, 2002	

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231. WC 9039367 v1



619417003710US

UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
www.uspto.gov

APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
10/046,070	01/11/2002	Wayne Karpoff	019417-003710US

20350
TOWNSEND AND TOWNSEND AND CREW, LLP
TWO EMBARCADERO CENTER
EIGHTH FLOOR
SAN FRANCISCO, CA 94111-3834

CONFIRMATION NO. 2827

FORMALITIES LETTER



OC000000007447363

Response Due

4802 PW

Date Mailed: 02/08/2002

NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

Filing Date Granted

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given TWO MONTHS from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The statutory basic filing fee is missing.
Applicant must submit \$ 740 to complete the basic filing fee for a non-small entity. If appropriate, applicant may make a written assertion of entitlement to small entity status and pay the small entity filing fee (37 CFR 1.27).
- The oath or declaration is unsigned.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(l) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.
- The balance due by applicant is \$ 870.

A copy of this notice MUST be returned with the reply.

Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART I - ATTORNEY/APPLICANT COPY

04/11/2002 RBERHE 00000067 201430 10046070

01 FC:201	370.00 CH
02 FC:205	65.00 CH